DEPARTMENT USE ONLY:					
Ref No.	Rel No.	C/R No.	Date Proc.		

STATE OF NEW JERSEY DEPARTMENT OF BANKING and INSURANCE

OFFICE OF ADMINISTRATION AND FINANCE LICENSING SERVICES BUREAU PO Box 473 Trenton, NJ 08625

LICENSED LENDERS APPLICATION

INDICATE AUTHORITY(ies): Mortgage Banker Mortgage Broker Correspondent Mortgage Banker Secondary Mortgage Lender Consumer Lender Sales Finance Company				
	OU MUST INDICATE HERE WHETHER THE BUSINESS OR INDIVIDUAL EVER HAD A LICENSE SUED BY THIS DEPARTMENTYESNO			
T	HIS APPLICATION IS FILED BY A:CorporationSole ProprietorPartnership			
	Limited Partnership Limited Liability Company			
TY	PE OR PRINT CLEARLY			
1.	Name of applicant:			
	D/B/A or Trade Name (if applicable)			
2.	N.J. Principal Business Address: (include County)			
	Contact Person Tel. No			
3.	Federal Tax Identification No			
4.	The general books are maintained at:			
	Address			
	Telephone No.			
	Person to Contact			

5. Officer/Partner/Sole Prop	orietor information (at	tach additional sheets if necessary):
NAME	TITLE	BUSINESS ADDRESS
6. Director information (atta	ch additional sheets if	necessary):
NAME		BUSINESS ADDRESS
7. Stockholders information		10%). Attach additional sheets if necessary.
NAME	% of OWNER SHIP	R- BUSINESS ADDRESS
8. Name, residence and busi	ness address of the reg	gistered agent in this State
9. Date of incorporation/form		
10. Place of incorporation/for	mation:	in the County ofState of
		sey(applicable to foreign corporations). tion/formation with all amendments to date.
12. Are any of the persons lis	sted in question 5, 6, a	nd 7 related by blood or marriage? Yes No
		ers or substantial stockholders over 18 years of age and If the answer is no, attach schedule giving details.

	cant or any of the officers, directors, partners, owners, substantial stockholders now under this state, any other state, or federal jurisdiction? Yes No
arrested (other	plicant or any of the officers, directors, partners, owners, substantial stockholders been indicted, than for motor vehicle violations) or convicted of any offense, crime or misdemeanor in this state, or by the federal government? Yes No
to engage in thi	plicant or any officer, director, partner, owner, substantial stockholder ever had a license, or right is or any other business or profession, penalized, suspended, restrained, revoked, denied by any state, any other state, or by the federal government? Yes No
held any license such license or	plicant or any officer, director, partner, owner, substantial stockholder of your organization ever e issued by the Department of Banking and Insurance? Yes No If yes, has any right to engage in any other business or profession ever been involuntarily surrendered to any state, any other state, or by the federal government? Yes No
bankruptcy or reorganization?	plicant or any officer, director, partner, owner or substantial stockholder ever filed a petition in reorganization or been affiliated with any entity that has filed a petition in bankruptcy or Yes No If yes, give particulars on a separate schedule including date of reorganization proceedings, copy of petition in bankruptcy and copy of discharge, if applicable.
19. If you answapplicable docu	vered Yes to any of the above questions, provide detailed explanation and attach copies of any imentation.
SOLE PROPE	RIETOR ONLY
20. Are you the and/or are you	e subject of an arrest warrant for failing to comply with court ordered child support obligations in arrears on such obligations for a period of six months or more? Yes No A FALSE STATEMENT MAY SUBJECT YOU TO CONTEMPT OF COURT.
NOTE:	Disclosure of Social Security Numbers is mandatory for child support enforcement purposes. The authority to compel disclosure of Social Security Numbers is established at P.L. 1996, c7 and N.J.A.C. 3:1-20.

CERTIFICATION

I, the applicant, being duly sworn according to law depose and say that the answers set forth are true to the best of my knowledge and belief. This application is made for the purpose of inducing the issuance of a licensed lenders license and I understand that any information withheld or which represents a material misstatement will constitute grounds for rejection of this application by the Commissioner of Banking and Insurance.

Signed, sealed and delivered in the presence	(Name of Applicant)	
(CORPORATE SEAL) (if applicable)	(Signature of Corporate President, Partner or Sole Proprietor)	
Attest: (Corporate Secretary or Witness)		
Subscribed and sworn to before me at		
thisday of		
(Official Title)		

Rev 5/04